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Request	Application Number	09/545,984		
for	Filing Date	04/10/2000		
Continued Examination (RCE) Transmittal	First Named Inventor	Hugh Hind		
ransmual	Art Unit	2172		
Mail Stop RCE Commissioner for Patents	Examiner Name	Bacquoc N. To		
P.O. Box 1450	Attorney Docket Number	555255012123		
This is a Request for Continued Examination (RCE) request for Continued Examination (RCE) practice under 37 G	under 37 CFR 1.114 of the all IFR 1.114 does not apply to any ut CEs (not to be submitted to the US	nove-identified application. litiy or plant application filed prior to Ja BPTO) on page 2.	ma 8.	\
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amendment(s). Previously submitted. If a final Office sction is considered as a submission even if this box is	s outstanding, any amandmenta fili s not checked.	eq after the ithou clittoe across may be		
L Consider the arguments in the Appeal	Brief or Rely Brief previously filed		rechnology Ce	inter 2100
ii. Other				
b. Enclosed				
I. Amendment/Reply III. Information Disclosure Statement (IDS)				
ii. Alfidavii(s)/ Declaration(s)	N Other			
2. Miscellaneous Suspension of ection on the above-identifies portiod ofmonths. (Period of suspe	d application is requested under 3 inside shall not exceed 3 months; Fee o	7 CFR 1.103(c) for a under 37 CFR 1.17(i) required)		
b. Other The RCE fee under 37 CFR 1.17(e) is requ The Director is hereby authorized to charge 8. Pepasit Account No. 601432 (ref. 555255	CINCIONOMINA INDEL AT THE		_ AŒ 00.957	1 EC:1801
L RCE fee required under 37 CFR 1.17	(e) 770.00	201435 09545964	(EDIL (0000001	13HN 403/5004
Extension of time fee (37 CFR 1.136 an	d 1.17)	• .		
III. Other	enclose	4		
b. Check in the amount of \$	(bosol-		.	
c. Payment by credit card (Farm PTO-2008 enc WARNING: Information on this form be included on this form. Provide		d Information should not cortation on PTO-2038.		
De mended on this forms.	MANY ATTORNEY OR AGENT	REQUIRED		
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Signature Allia Signature to obtain or relating bonefit by the public which is to file (and by the USPTO				
to process) on appropriate and substituting the completed application for galvering, preparing, and substituting the complete this form and/or supposite encount of time you require to complete this form and/or supposite and complete this form and complete the form and/or supposite the complete this form and complete the sound of the complete the complete the sound of the complete the complete the sound of the complete the comp	im to the USPTO. Time will vary depond for reducing this burden, should be	e sent to the Chief Information Officer, U.S. OCT BEND FEES OR COMPLETED FOR		